

**BY ORDER OF THE COMMANDER
HILL AIR FORCE BASE**

**HILL AIR FORCE BASE INSTRUCTION
48-102**



1 APRIL 2014

Aerospace Medicine

**HILL AIR FORCE BASE RESPIRATORY
PROTECTION PROGRAM**

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This instruction implements Air Force Policy Directive (AFPD) 48-1, *Aerospace Medicine Program*. It establishes guidance, procedures, and responsibilities for conducting the Respiratory Protection Program () at Hill Air Force Base (AFB). Incorporated in these documents are the requirements of 29 CFR 1910.134, *Respiratory Protection* and Air Force Occupational Safety and Health (AFOSH) Standard 48-137, *Respiratory Protection Program*. It applies to 75th Air Base Wing (ABW), 388th Fighter Wing (FW), Ogden Air Logistics Complex (OO-ALC), 419th Fighter Wing (FW), US Army operations, other associate units, and specified contractors (by support agreement) on Hill AFB who require Respiratory Protection (RP). RPP deals with the prevention and control of chemical, radiological and biological exposures in the work environment and applies to all US Air Force military and civilian personnel. This publication requires the collection and or maintenance of information protected by the Privacy Act (PA) of 1974 authorized by 10 U.S.C. 55, *Medical and Dental Care*; 10 U.S.C. 8013, *Secretary of the Air Force*; powers and duties; delegation by, and Executive Order 9397 as amended. Forms affected by the PA have an appropriate PA statement. The applicable System of Records Notice (SORN) 62 FR 31793, *Reporting of Medical Conditions of Public Health and Military Significance*, is available at <http://dpclo.defense.gov/privacy/SORNs/SORNs.html>. Refer recommended changes and questions about this publication to the Office of Primary Responsibility (OPR) using the Air Force (AF) Form 847, *Recommendation for Change of Publication*. Ensure that all records created as a result of processes prescribed in this publication are maintained In Accordance With (IAW) Air Force Manual (AFMAN) 33-363, *Management of*

Records, and IAW the Air Force Information Management System (AFRIMS) Records Disposition Schedule (RDS). Refer recommended changes and questions about this publication to the OPR using the AF Form 847, *Recommendation for Change of Publication*.

SUMMARY OF CHANGES

This instruction has been changed substantially for compliance with AFOSH Standard 48-137 IC2, dated 7 April 2009, and must be reviewed in its entirety. Changes/revisions include changes to responsibilities, emergency escape respirator selection, specific documentation requirements, and procedures for Quantitative Fit Testing (QNFT) military gas masks.

1. Policies.

1.1. Use of Respirators. RP will be worn where specified by an applicable directive or when required in writing by 75 AMDS/SGPB. The requirement to wear RP will be validated by the results of air sampling conducted in the workplace. 75 AMDS/SGPB will make a determination when the policy requirement is not explicit and will work with the supervisor to request clarification or change, AFTO Form 22, *Technical Manual (TM) Change Recommendation and Reply*. In work situations where timely air sampling is not feasible, 75 AMDS/SGPB may require RP based on observation of the work process, professional judgment, and experience.

1.1.1. Respirator Certification. RP used under this program will be certified by the National Institute for Occupational Safety and Health (NIOSH). Certification numbers are prefixed with the letters TC (Test Certification) followed by numerical sequence.

1.2. Written RPP. All workplaces where RP is used must establish a written RPP IAW AFOSH Standard 48-137. At Hill AFB, the workplace Respiratory Protection Operating Instruction (RPOI) will be written and provided by 75 AMDS/SGPB. Supervisors will coordinate on the RPOI annually.

1.3. Type of Respirator. The type of RP to be used in workplaces will be specified by 75 AMDS/SGPB personnel. RP will be deemed required if directed by an AF Technical Order (T.O.) or a substance-specific instruction/regulation or a 75 AMDS/SGPB workplace evaluation. No elective-use RP will be worn; however, Filtering Face Piece Devices (FFPDs), commonly called “dust masks,” may be used when authorized in writing by 75 AMDS/SGPB for comfort use when no documented health hazard exists. All personnel must go through their supervisor to obtain an FFPD; however, those supervisors must first attend the Supervisor Training Course 1767 (MHPMED0001767SU) before allowing their employees to wear FFPDs.

1.4. RP for Disease Prevention/Control. If a disease outbreak occurs, the type of mask and personnel required to wear them will be in compliance with Occupational Safety and Health Administration (OSHA) requirements, 29 CFR 1910.134. Use of surgical masks by individual workers/patients to prevent infection is not controlled by this regulation.

2. Responsibilities.

2.1. Unit Commanders or Officers in Charge. Establish and conduct an installation RPP conforming to the requirements of this standard and applicable OSHA standards when RP is required and used within their organization.

2.2. Bioenvironmental Engineering Flight. 75 AMDS/SGPB is the installation-level authority on RP and conducts all aspects of an installation-level RPP unless otherwise specified by this standard.

2.2.1. 75 AMDS/SGPB is the OPR for the installation RPP; is the authority for determining if RP is required; and ensures procedures are in place for controlling the ordering and issuing of RP.

2.2.2. 75 AMDS/SGPB develops appropriate cartridge change-out schedules, based on objective exposure data, and ensures they are specified in the workplace-specific RPOIs.

2.2.3. Bioenvironmental Engineering conducts routine and special surveys (when needed) in workplaces where respirators are used.

2.2.4. Respirator cleaning facility operations will be reviewed by means of a physical inspection annually. Additionally, all respirator cleaning stations located in shops, must be approved in writing by 75 AMDS/SGPB. Building 535 (an OO-ALC funded, contractor operated, facility for OO-ALC personnel) is the only cleaning facility currently approved and identified at Hill AFB. All future cleaning facilities must be listed after they are approved. Additional cleaning procedures will be included in each shop RPOI as needed.

2.2.5. 75 AMDS/SGPB administers or appoints an individual in writing to administer the installation RPP. The administrator must have attended either the 4BXXX, 43EX AFSC course, or a RP training course (i.e., OSHA Training Institute or equivalent).

2.3. Respiratory Protection Program Administrator (75 AMDS/SGPB):

2.3.1. Conducts and documents a Hill AFB RPP and reviews at least annually, according to provisions in AFOSH Standard 48-137. 75 AMDS/SGPB will report the findings in writing to the Aerospace Medicine Council (AMC) and the installation Environmental, Safety and Occupational Health Council (ESOHC).

2.3.2. Maintains or has immediate access to current copies (paper or electronic) of applicable OSHA standards (i.e. 29 CFR 1910 or 29 CFR 1926) and the NIOSH certified equipment list.

2.3.3. Ensures Force Health Management (75 AMDS/SGPM) and Occupational Medicine Clinic (75 AMDS/SGPO) personnel use the appropriate RP medical evaluation questionnaire per 29 CFR 1910.134.

2.3.4. Provides guidance to workplace supervisors, as necessary, regarding their workplace-specific RPOI and annual RP training.

2.3.5. Ensures fit testing is conducted according to 29 CFR 1910.134. Oversees fit testing conducted on those individuals who have been medically cleared by a Physician or Other Licensed Health Care Professional (PLHCP).

2.3.6. Educates and trains workplace supervisors, supply personnel, and those individuals appointed to oversee the use, maintenance, and care of common use or escape-only RP. Works with OO-ALC Training Office to schedule training classes as needed (preferably monthly). Maintains documentation of attendance at training.

2.3.7. Monitors the NIOSH *Respirator User Notices* and NIOSH *National Personal Protective Technology Laboratory (NPPTL) Press Releases* quarterly. Ensures supervisors, safety personnel, and RP wearers are informed of any recalls, warnings, etc. regarding RP worn.

2.3.8. Resolves inconsistencies between T.O.s and HAFBI 48-102 and AFOSH Standard 48-137 using official channels. Use AFTO Form 22, to request a change to the T.O. 75 AMDS/SGPB will send a coordinated copy of the AFTO Form 22 to AFMC/SGPB and the T.O. Manager.

2.3.9. Refers individuals requiring RP related medical evaluations (initial/periodic respiratory questionnaire), or when physical/work condition change to 75 AMDS/SGPO.

2.3.10. Advises on the use of RP designed for use in emergency response scenarios. Home-station defense during Chemical, Biological, Radiological, Nuclear, High Yield Explosive (CBRNE) events will require NOISH certified RP. For contingency operations (deployed only) and training in preparation for deployments, the use of military-unique respirators (M-45, M-50, MCU-2 series) are authorized (refer to Paragraph 10).

2.3.11. Maintains oversight and responsibility if 75 AMDS/SGPB authorizes other organizations or contractors to conduct respirator fit testing. Ensures agreements and procedures are documented and followed.

2.3.12. Ensures workplace-specific, written RPOIs are reviewed annually. Updates the RPOI template as changes to standards occur.

2.4. Supervisors of Workplaces Where RP is Required:

2.4.1. Maintain access to this standard in the workplace. Maintain and enforce the workplace-specific written RPOI according to the guidance in this standard. Supervisors shall review the workplace-specific written RPOI annually to ensure it is current.

2.4.2. Contact 75 AMDS/SGPB to schedule appropriate evaluations when new hazardous materials are introduced, processes or procedures are changed, or engineering controls are modified or added (OO-ALC process/facility engineers are responsible to notify 75 AMDS/SGPB prior to engineering controls being modified/replaced).

2.4.3. Notify 75 AMDS/SGPB of conflicts between RP guidance and applicable T.O.s and initiate an AFTO Form 22 for resolution.

2.4.4. Provide initial and periodic (annual and as changes occur) RP training per 29 CFR 1910.134, including training to all personnel in their workplace who use "voluntary use" FFPDs. Refer to 29 CFR 1910.134, Appendix D, for mandatory training requirements for voluntary use RP. Document training on AF Form 55, *Employee Safety and Health Record*, or equivalent.

2.4.5. Provide for quality control of respirator breathing-air (if used) according to T.O. 42B-1-22, *Quality Control of Compressed and Liquid Breathing Air*. This includes ensuring breathing air samples are collected for analysis; bump testing of alarm systems is conducted; and the systems and monitors are being maintained and calibrated as required. Furnish breathing air sampling results to 75 AMDS/SGPB for review. Discontinue the use of compressed breathing air and contact 75 AMDS/SGPB if sample

results are unsatisfactory and/or personnel complain of taste, odor, or irritation from compressed breathing air.

2.4.6. Ensure that all tight fitting RP is cleaned IAW 29 CFR 1910.134 after a total of eight hours of use. Blast helmets and nondisposable supplied-air hoods will be cleaned after each work day, properly stored, and maintained according to manufacturer's recommendations or BE approved local procedures.

2.4.6.1. Supervisors will ensure employees clean respirators per the workplace specific respirator OI after each use using a non-alcohol respirator wipe.

2.4.6.2. **(OO-ALC Only)** Supervisors will ensure all employees using tight fitting RP, turn in RP to the OO-ALC Cleaning Facility, Building 535, after eight hours of total use.

2.4.7. Appoint an individual to be responsible for the use, cleaning, maintenance, inspection, and care of common use, emergency or escape RP, as appropriate. Ensure this RP is inspected monthly and the inspection documented on AF IMT 1071, *Inspection/Maintenance Record*.

2.4.8. Maintain NIOSH certifications by ensuring RP assemblies are not modified or parts from different manufacturers are not mixed.

2.4.9. Ensure all breathing air connections are clearly labeled and not compatible with connections for compressed shop air or other gas systems (this responsibility also rests with process/facility engineers who acquire/modify equipment). Ensure breathing air hoses are stored so that openings are not contaminated with paint, loose blasting media, dirt, etcetera. Breathing air hoses must be properly capped when not in use.

2.4.10. Ensure personnel on the RPP wear only 75 AMDS/SGPB approved RP for the hazard and for which they have been fit tested and trained.

2.4.11. Ensure personnel wear only Filtering Face Piece Devices (FFPDs) approved by 75 AMDS/SGPB and are trained on the use of these devices annually.

2.4.12. Advise all RP wearers that they may safely leave the area at any time for relief from RP use in the event of equipment malfunction, physical or psychological distress, procedural or communication failure, significant deterioration of operating conditions, or any other conditions that might warrant such relief.

2.4.13. Ensure workers have received the necessary medical evaluations, training, and fit testing through 75 AMDS/SGPO, at 777-2719 before engaging in workplace operations requiring the use of the RP.

2.4.14. Supervisors receive training from 75 AMDS/SGPB as specified in Chapter 8 of AFOSH Standard 48-137 and should contact 75 AMDS/SGPB should they become a supervisor of a new workplace.

2.4.15. Follow and enforce the cartridge change-out schedule developed by 75 AMDS/SGPB included in the workplace-specific RPOI.

2.4.16. Notify the 75 AMDS/SGPO at 777-1163 when new employees require fit testing or current employees have a change affecting their wear of RP.

2.5. The Occupational Medicine Clinic (75 AMDS/SGPO):

- 2.5.1. Ensures the medical questionnaire and workload data are evaluated by a PLHCP for all workers upon initial entry in and are filed in each individual medical record;
- 2.5.2. Ensures the medical opinion (based on questionnaire evaluation) documents whether the individual is or is not medically cleared to wear RP and contact the patient if further evaluation or assessment of patient is necessary to make this determination;
- 2.5.3. Ensures medical profile for active duty Air Force personnel or equivalent appropriate work restrictions for civilian employees is completed if a medical condition has developed which could interfere with the wear of RP for workers entered in the and notify 75 AMDS/SGPB for removal from the RPP;
- 2.5.4. Forwards the completed medical clearance letter for workers to personnel assigned to perform fit testing and files the medical questionnaire in the individual's medical record;
- 2.5.5. Determines if a medical condition has developed which could interfere with the wear of the RP during annual and other scheduled medical examinations (for those individuals entered in RPP).

2.6. Base Fire Department (775 CES/CEF):

- 2.6.1. As base experts on Self-Contained Breathing Apparatus (SCBA), 775 CES/CEF and 75 CEG/CEUF personnel will provide annual training for emergency response workers who must wear a SCBA. Advise supervisors of alternate training sources if SCBA training cannot be provided;
- 2.6.2. Trainers will sign the AF Form 2767, *Occupational Health Training and Protective Equipment Fit Testing*, to document the Fire Department conducted training.
- 2.6.3. Will ensure their breathing air compressor system used to refill SCBA is sampled before initial use, after replacement of the compressor, purifier, or other major repairs, and once every 90 days. Will forward results of sampling to 75 AMDS/SGPB.

2.7. Optometry Clinic (75 AMDS/SGPE). Performs eye examinations for all active duty members enrolled in the RPP. Assists civilian employees enrolled in RPP in procurement of eyeglass inserts for full-face respirators. Individuals will bring the required insert to the Optometry Clinic. The insert will be mailed to the lab who will fabricate lenses, install them into the insert and return them to the Optometry Clinic.

2.8. Supply Divisions (All Hill AFB organizations who purchase RP):

- 2.8.1. Order only the respirators indicated on the worker's current fit testing letter. Substitutions are not permitted. All RP must be approved by 75 AMDS/SGPB before any new RP is purchased, this includes any type of helmet attached to a breathing air system.
- 2.8.2. Do not issue respirator items other than those originally approved by 75 AMDS/SGPB (e.g., no "suitable substitutes").
- 2.8.3. Ensure personnel who issue RP and replacement parts are trained annually on the requirements of this Instruction.

2.9. Workers Assigned to Activities Requiring Use of RP.

2.9.1. Wear RP properly and consistently for chemical, biological, radiological, and work activities identified by 75 AMDS/SGPB.

2.9.2. Immediately report any RP problems to the supervisor (noticeable chemical odors, damaged RP, improper seal, etc.).

2.9.3. Immediately notify the supervisor and 75 AMDS/SGPO if medical conditions develop which may void qualification status.

2.9.4. Remain clean-shaven to ensure the face-to-face piece seal can be maintained when wearing a tight-fitting RP.

2.9.5. Perform positive and negative pressure checks in a “clean air” environment each time the RP is donned.

2.9.6. Do not wear normal eyeglasses or gas mask inserts with tight-fitting full-face piece RP. 75 AMDS/SGPE can assist with procurement of appropriate eyeglass inserts. OSHA allows the use of contact lenses where individuals have successfully worn such lenses in the past (see OSHA Technical Manual, Section VII: Chapter 2 for additional guidance).

2.9.7. Inspect all RP or supplied-air system components before each use and perform necessary cleaning and maintenance as prescribed by 29 CFR 1910.134 and AFOSH Standard 48-137.

2.9.7.1. **(OO-ALC Only)** Employees will clean respirators per the workplace-specific respirator operating instruction (OI) after each use using a non-alcohol respirator wipe.

2.9.7.2. **(OO-ALC Only)** Employees will turn-in respirators for thorough cleaning by using the Hazmart respirator cleaning facility service after every 8 hours of accumulated use (to coincide with filter cartridge replacement).

2.9.7.3. Ensure breathing air hoses are stored so that openings are not contaminated with paint, loose blasting media, dirt, etc. Breathing air hoses must be capped when not in use.

2.9.7.4. Hill organizations not using the OO-ALC respirator cleaning facility will ensure that all tight fitting RP are cleaned in accordance with 29 CFR 1910.134, on at least a weekly basis if used during that week.

2.9.7.5. Blast helmets and non-disposable supplied-air hoods should be cleaned after each work day, properly stored, and maintained according to manufacturer's recommendations or BE approved local procedures.

2.9.8. For initial fit tests, complete and provide medical questionnaire to 75 AMDS/SGPO soon as possible. **NOTE:** Under no circumstances will a worker be fit tested with RP without being medically cleared by a PLHCP.

3. Selection, Use, and Limitations.

3.1. Personnel will be placed on the RPP only for protection against significant airborne chemical, biological, and radiological exposures. Additionally, emergency response

personnel may be required to wear specific RP for CBRNE responses (reference the shop-specific RPOI).

3.2. 75 AMDS/SGPB quantifies potential exposures. If the hazard cannot be controlled via engineering or administrative controls, 75 AMDS/SGPB will select the type of RP (e.g., SCBA full or half-face air purifying and supplied air), cartridge, or canister type most suitable for controlling existing hazard and specify when the cartridge/canister must be changed based on estimate of service life from specific manufacture databases or using professional judgment. If personnel are concerned about potential chemical, biological, or radiological hazards they should contact 75 AMDS/SGPB.

3.3. The work center must procure RP of the same manufacturer, model, and size for which shop personnel are fitted.

4. Emergency-Use Respirators.

4.1. If personnel believe emergency-use RP are required for egress, the shop supervisor must contact 75 AMDS/SGPB. 75 AMDS/SGPB will review emergency/spill scenarios and select the best egress RP, if one is required.

4.2. Tight-fitting SCBA with backpack style tanks are not adequate egress RP and will not be used for egress purposes.

4.3. 75 AMDS/SGPB and 775 CES/CEF personnel must review other emergency scenarios (e.g., rescue and spill response) prior to purchase of emergency-use RP.

4.4. A monthly inspection (every 30 days) is required for SCBA, air-line, and any other emergency-use RP. This inspection must be documented on an AF Form 1071, *Inspection and Maintenance Record*.

5. Training.

5.1. 75 AMDS/SGPB Supervisor Training. 75 AMDS/SGPB will provide initial training (MHPMED0001767SU) for supervisors assigned to shops requiring RP. The training will be documented on the individual's AF Form 55 or equivalent system. This training is also required for supervisors in shops with personnel using FFPDs.

5.2. Respirator Wearer - Initial. Once personnel have been medically cleared to wear RP, they will be scheduled by 75 AMDS/SGPB for fit testing and training. The supervisor will document this training and fit testing on the individual's AF Form 55 or equivalent.

5.3. Respirator Wearer - Annual. Annual work center specific training will be provided during 75 AMDS/SGPB Industrial Hygiene Assessment. Training information, Training Scheduling System (TSS) Course MHPMED0001767SU, and RPOI will be provided to the supervisor for training new personnel or those absent during the scheduled training. The supervisor will provide and document the annual training on the individual's AF Form 55 or equivalent.

5.4. Base Supply and Bench stock personnel who order and/or issue RP devices and parts will receive initial and annual training, TSS Course MHPMED0001781SU, from 75 AMDS/SGPB. As a minimum, 75 AMDS/SGPB will train one supervisor in each supply or bench area. The supervisor will document all training on AF Form 55 or equivalent.

6. Fit Testing. 75 AMDS/SGPB and/or 75 AMDS/SGPO will ensure all fit testing is accomplished, including quantitative and qualitative fit testing. All fit testing will be performed at Building 249. 75 AMDS/SGPO is required to use US Air Force School of Aerospace Medicine (USAFSAM) mandated standard RP names and models in Defense Occupational and Environmental Health Readiness System (DOEHRS). Supervisors must coordinate all fit testing with 75 AMDS/SGPB and/or 75 AMDS/SGPO before individuals report for fit testing. Under no circumstances will individuals be fit tested if not medically cleared by the occupational health consultant or other PLHCP.

7. Respirator Cleaning Facilities. All respirator cleaning facilities must clean RP in accordance with 29 CFR 1910.134. Shops with large numbers of RP are encouraged to have their RP cleaned and serviced at the OO-ALC Respirator Cleaning Facility, Building 535. The respirator cleaning facility in Building 535 is a contractor run operation funded under the OO-ALC. Non OO-ALC organizations wishing to utilize this capability should contact the Base Bioenvironmental Engineering Flight and the OO-ALC Contract Management Office (OO-ALC/OBC).

7.1. 75 AMDS/SGPB will inspect all respirator cleaning facilities annually to ensure compliance with 29 CFR 1910.134.

7.2. **(OO-ALC Only)** . Supervisors will ensure all employees using tight-fitting RP turn in RP to the OO-ALC Respirator Cleaning Facility after eight hours of total use.

7.3. **(OO-ALC Only)** Organizations wishing to receive the same respirators back should attach a waterproof tag (or metal dog tag) to the respirator identifying the servicing Hazmart, building number, organization, and employee name. All efforts will be made to return original respirators, though this cannot be fully guaranteed.

7.4. **(OO-ALC Only)** Respirator drop-off/pick-up locations will follow the guidance at the following link for management of this operation: <https://org.eis.afmc.af.mil/sites/309MXW/OSHA/Regulations%20and%20Guidance/Forms/AllItems.aspx>.

8. Administrative Procedures. Shop supervisors will maintain access to RPP documents. This must include the following: AFOSH Standard 48-137, Hill AFB Instruction 48-102, the shop's RPOI provided by 75 AMDS/SGPB, copies of each individual AF Form 2772, *Certificate of Respirator Fit Test*, or equivalent T.O. 42B-1-22, *Quality Control of Compressed and Liquid Breathing Air*, and copies of breathing-air sample results if supplied air respirators are used. If an organization maintains material electronically, workers will be briefed how to access the information. The OO-ALC Hazard Communication (HAZCOM) system maintains access to a number of these documents. **NOTE:** A copy of T.O. 42B-1-22 is only required to be maintained if the breathing air is supplied by compressor or air bottle.

9. Program Evaluation.

9.1. 75 AMDS/SGPB will conduct an annual review of the shop RPP. These shop-level reviews will be incorporated into the program's annual review that is reported in writing to the AMC and the ESOHC.

9.2. The annual review of the shop RPP will normally be conducted during the 75 AMDS/SGPB annual industrial hygiene survey visit. Military-unique shops, SFS and EOD, will be addressed individually in their shop-specific RPOI, reference 2.3.10.

10. CBRNE Protective Mask Quantitative Fit Testing (QNFT).

10.1. Individuals needing a fit test can call 75 AMDS/SGPB at 777-4551 to schedule an appointment. Fit testing is performed on Mondays from 0900-1530 in 15-minute increments. Appointments may be made outside this window for special needs only; i.e., short notice deployments, mass fit-tests, etcetera.

10.2. QNFT will be conducted in accordance with AFOSH Standard 48-137.

10.3. The following is required of the individual being fit tested:

10.3.1. Do not eat, drink (except water), smoke, suck on a cough drop, chew gum, or brush teeth 30 minutes prior to their appointment.

10.3.2. Cologne/perfume should not be worn on the day of the appointment for it can hinder the test from giving an accurate result.

10.3.3. If optical lenses/contacts are worn to perform duties, the inserts must be appropriate for the individual mask and brought to the appointment (contact lenses are not to be worn during the QNFT fit test). 75 AMDS/SGPB will not fit test individuals without special inserts appropriate to mask.

10.3.4. Masks are fit to size so the individual is not required to bring their own mask.

10.4. M-45 Land Warrior Masks. In accordance with QNFT and Training Program Policy letter, dated 25 June 2004: "Individuals declared hard-to-fit by 75 AMDS/SGPB and/or issued a M-45 Land Warrior, Chemical-Biological Mask will continue to deploy with same mask used for QNFT." Once the individual has received their M-45, they must schedule an appointment with 75 AMDS/SGPB to be fit to that mask. Individuals issued the M-45 mask will retain possession of it between duty stations until he/she terminates active or reserve service.

10.5. Currently, an individual's unit funds must be used to order the CBRN protective masks and spare parts. Optical inserts (if applicable) are purchased through the 75 AMDS/SGPE.

KATHRYN L. KOLBE, Colonel, USAF
Commander

Attachment 1

GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION

References

29 CFR 1910.134, *Respiratory Protection*, 1 July 2009

29 CFR 1926, *Safety and Health Regulations for Construction*, 1 July 2009

AFPD 48-1, *Aerospace Medicine Program*, 3 October 2005

AFJ 44-117, *Ophthalmic Services*, 1 January 1986

AFMAN 33-363, *Management of Records*, 1 March 2008

AFOOSH Standard 48-137 IC2, *Respiratory Protection Program*, 7 April 2009

T.O. 42B-1-22, *Quality Control of Compressed and Liquid Breathing*, 13 March 2009

T.O. 14P4-15-1, *MCU-2A/P*

T.O. 14P4-15-11, *Operator and Unit Maintenance Manual for Protective Assessment Test System, M41*

Technical Manual (T.M.) 3-4240-348-10, *Mask, Chemical-Biological: Land Warrior, M45*

T.M. 10-8415-230-10, *Joint-Firefighter Integrated Response Ensemble, J-FIRE*

QNFT and Training Program Policy, 25 Jun 2004

Adopted Forms

AF Form 847, *Recommendation for Change of Publication*

AFTO Form 22, *Technical Manual (TM) Change Recommendation and Reply*

AF Form 55, *Employee Safety and Health Record*

AF Form 2767, *Occupational Health Training and Protective Equipment Fit Testing*

AF Form 1071, *Inspection and Maintenance Record*

AF Form 2772, *Certificate of Respirator Fit Test*

Abbreviations and Acronyms

AFB—Air Force Base

AFRIMS—Records Disposition Schedule (RDS)

AMC—Aerospace Medicine Council

CBRN—Chemical, Biological, Radiological and Nuclear

CBRNE—Chemical, Biological, Radiological, Nuclear, High Yield Explosive

DOEHRS—Defense Occupational and Environmental Health Readiness System

ESOHC—Environmental Safety and Occupational Health Council

FFPD—Filtering Face Piece Device

HAZCOM—Hazard Communication

MSHA—Mine Safety and Health Administration

NIOSH—National Institute of Occupational Safety and Health

OI—Operating Instruction

OPR—Office of Primary Responsibility

OSHA—Occupational Safety and Health Administration

PLHCP—Physician or other Licensed Health Care Professional

QNFT—Quantitative Fit Testing

RPP—Respiratory Protection Program

SCBA—Self-Contained Breathing Apparatus

TC—Test Certification

TM—Technical Manual

T.O.—Technical Order

Terms

Respirator—. An approved device designed to provide the wearer with respiratory protection against harmful environments. The respirator shall be tested and listed by the National Institute for Occupational Safety and Health (NIOSH) or Mine Safety and Health Administration (MSHA).

Common—Use Respirators. Respirator masks, hoods or helmets that can be used by more than one individual.

Filtering Face Piece Device (FFPD)—. A respirator, which has a face piece made entirely of filtering or adsorbing material. These respirators do not have changeable filters or cartridges but may have an exhalation valve.

Fit Testing- The fit testing of face pieces to the individual following quantitative or qualitative protocols identified in AFOSH Standard 48-137.